| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | *Cmr* | 67614 | 14/4/55 |
| O.I.P.E. CLASSIFIER | | 10 | 12-21-99 |
| FORMALITY REVIEW | | 71622 | 1 11 00 |
| RESPONSE FORMALITY REVIEW | | | |
| | | | |

## INDEX OF CLAIMS

| | | | | |
|---|---|---|---|---|
| ✔ | ................................. Rejected | N | ................................. Non-elected |
| = | ................................. Allowed | I | ................................. Interference |
| – | (Through numeral)... Canceled | A | ................................. Appeal |
| ÷ | ................................. Restricted | 0 | ................................. Objected |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)